

SOUTHAMPTON TOWN

Department of Land Management

Building & Zoning Division

116 Hampton Road, Southampton, NY 11968

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www.southamptontownny.gov/buildingzoning



ANNA THRONE-HOLST
TOWN SUPERVISOR

KYLE P. COLLINS, AICPTOWN PLANNING AND
DEVELOPMENT ADMINISTRATOR**MICHAEL BENINCASA**

CHIEF BUILDING INSPECTOR

WHOLE STRUCTURE DEMOLITION PERMIT HOLD HARMLESS FORM**Hold Harmless Form must be signed and notarized by everyone on the deed.**

I, _____ and _____, are the owner(s) of that certain parcel known and designated as SCTM#_____, located at _____, within the Town of Southampton (hereinafter the "Property").

On _____, I/we filed an application with the Town of Southampton Building Department for a demolition permit for certain whole structure(s) located on such Property.

I/we hereby release the Town of Southampton from any and all losses and damages that I/we may suffer or incur as the result of the demolition of such structure(s) located on the Property. I further agree to indemnify and hold harmless the Town of Southampton from and against any and all demands, claims, liabilities, losses, damages, expenses (including attorney's fees) and judgments, relating to or arising from the issuance of the demolition permit or the demolition of any structure located on the Property, including but not limited to any claim(s) by any party having any interest in the Property.

Owner_____
Date_____
Owner_____
Date

Dated:

State of New York)

ss:)

County of Suffolk)

On the ____ day of _____, 201__, before me the undersigned, personally appeared _____ and _____, personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity(ies), and that by his/her/their signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument.

Sworn to before me this

____ day of _____, 2013

Notary Public _____